

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

1. (a) Name of Individual, Organization or Corporation NARAL Pro-Choice America			
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 1150 15th Street, NW			
(c) City, State and ZIP Code Washington DC 20005			3. FEC Identification Number <div style="border: 1px solid black; padding: 5px; display: inline-block;"> C C90004185 </div>
2. Occupation and Name of Employer (for Individual Filers Only)			

4. TYPE OF REPORT (check appropriate boxes):

(a) ☒ April 15 Quarterly Report

☐ July 15 Quarterly Report ☐ 24-Hour Report

☐ October 15 Quarterly Report ☐ 48-Hour Report

☐ January 31 Year-End Report

b) Is this Report an amendment? ☒ No ☐ Yes, it amends the report filed on / /

5. COVERING PERIOD:

FROM / /

THROUGH / /

6. TOTAL CONTRIBUTIONS.....

7. TOTAL INDEPENDENT EXPENDITURES

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE

DATE _____

[Electronically Filed]

Kimberly Robinson

Kimberly Robinson

04/15/2016

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. §437g.

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB
.

Form/Schedule: F5N
Transaction ID :

No contributions received

Form/Schedule:
Transaction ID:

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 3 OF 5
FOR LINE 7 OF FORM 5NAME OF FILER (In Full)
NARAL Pro-Choice AmericaFull Name (Last, First, Middle Initial) of Payee
Facebook

Date of Public Distribution/Dissemination

MM / DD / YYYY
01 / 08 / 2016

Mailing Address 156 University Ave

Amount

City State Zip Code
Palo Alto CA 94301-1688Amount
30.00

Transaction ID : VN7C2A0RWP3

Purpose of Expenditure
Online advertisingCategory/
TypeOffice Sought: ☐ House State: IA
☐ Senate District: 00
☒ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
HILLARY RODHAM CLINTONCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought 17251.90Disbursement For: ☒ Primary ☐ General
2016 ☐ Other (specify) ▶Full Name (Last, First, Middle Initial) of Payee
New Media Firm

Date of Public Distribution/Dissemination

MM / DD / YYYY
01 / 05 / 2016

Mailing Address 1730 Rhode Island Ave NW

Amount

City State Zip Code
Washington DC 20036-3101Amount
3750.00

Transaction ID : VN7C2A0KMK3

Purpose of Expenditure
Online advertisingCategory/
TypeOffice Sought: ☐ House State: NH
☐ Senate District: 00
☒ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
HILLARY RODHAM CLINTONCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought 3750.00Disbursement For: ☒ Primary ☐ General
2016 ☐ Other (specify) ▶Full Name (Last, First, Middle Initial) of Payee
New Media Firm

Date of Public Distribution/Dissemination

MM / DD / YYYY
02 / 10 / 2016

Mailing Address 1730 Rhode Island Ave NW

Amount

City State Zip Code
Washington DC 20036-3101Amount
12289.87

Transaction ID : VN7C2A0SKM6

Purpose of Expenditure
Online advertisingCategory/
TypeOffice Sought: ☐ House State: DC
☐ Senate District: 00
☒ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
MARCO RUBIOCheck One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought 16672.21Disbursement For: ☒ Primary ☐ General
2016 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶ 16069.87

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures.....▶
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 4 OF 5
FOR LINE 7 OF FORM 5NAME OF FILER (In Full)
NARAL Pro-Choice AmericaFull Name (Last, First, Middle Initial) of Payee
New Media Firm

Date of Public Distribution/Dissemination

MM / DD / YYYY
04 / 24 / 2015

Mailing Address 1730 Rhode Island Ave NW

Amount

City State Zip Code
Washington DC 20036-3101

4382.34

Transaction ID : VN7C2A0W2D7

Purpose of Expenditure
Media time buyCategory/
TypeOffice Sought: ☐ House State: DC
☐ Senate District: 00
☒ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
MARCO RUBIOCheck One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought 16672.21Disbursement For: ☒ Primary ☐ General
2016 ☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
New Media Firm

Date of Public Distribution/Dissemination

MM / DD / YYYY
03 / 31 / 2016

Mailing Address 1730 Rhode Island Ave NW

Amount

City State Zip Code
Washington DC 20036-3101

2000.00

Transaction ID : VN7C2A109C7

Purpose of Expenditure
Online advertisingCategory/
TypeOffice Sought: ☐ House State: WI
☐ Senate District: 00
☒ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
DONALD J TRUMPCheck One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought 2000.00Disbursement For: ☒ Primary ☐ General
2016 ☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
UNIONSource.com

Date of Public Distribution/Dissemination

MM / DD / YYYY
01 / 19 / 2016

Mailing Address PO Box 15084

Amount

City State Zip Code
Washington DC 20003-0084

11293.55

Transaction ID : VN7C2A0NV20

Purpose of Expenditure
Printing and shippingCategory/
TypeOffice Sought: ☐ House State: IA
☐ Senate District: 00
☒ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
HILLARY RODHAM CLINTONCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought 17251.90Disbursement For: ☒ Primary ☐ General
2014 ☐ Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... 17675.89

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures.....
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 5 OF 5
FOR LINE 7 OF FORM 5NAME OF FILER (In Full)
NARAL Pro-Choice AmericaFull Name (Last, First, Middle Initial) of Payee
UNIONSource.com

Date of Public Distribution/Dissemination

MM / DD / YYYY
02 / 07 / 2016

Mailing Address PO Box 15084

Amount

City State Zip Code
Washington DC 20003-0084Amount
2445.00

Transaction ID : VN7C2A0VFP8

Purpose of Expenditure
Printing and shippingCategory/
TypeOffice Sought: ☐ House State: IA
☐ Senate District: 00
☒ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
HILLARY RODHAM CLINTONCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought 17251.90Disbursement For: ☒ Primary ☐ General
2014 ☐ Other (specify) ▶Full Name (Last, First, Middle Initial) of Payee
UNIONSource.com

Date of Public Distribution/Dissemination

MM / DD / YYYY
02 / 17 / 2016

Mailing Address PO Box 15084

Amount

City State Zip Code
Washington DC 20003-0084Amount
3483.35

Transaction ID : VN7C2A0VFP8

Purpose of Expenditure
Printing and shippingCategory/
TypeOffice Sought: ☐ House State: IA
☐ Senate District: 00
☒ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
HILLARY RODHAM CLINTONCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought 17251.90Disbursement For: ☒ Primary ☐ General
2016 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Date of Public Distribution/Dissemination

MM / DD / YYYY

Mailing Address

Amount

City State Zip Code

Purpose of Expenditure

Category/
TypeOffice Sought: ☐ House State: _____
☐ Senate District: _____
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:

Check One: ☐ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office SoughtDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... 5928.35

(b) SUBTOTAL of Unitemized Independent Expenditures 0.00

(c) TOTAL Independent Expenditures..... 39674.11
(carry total from last page forward to Line 7)